

Computation of tax (continued)

Composition of prepayments (see instructions):		Date paid	Amount
32	Mandatory first installment	32	
33	Second installment from Form CT-400	33	
34	Third installment from Form CT-400	34	
35	Fourth installment from Form CT-400	35	
36	Payment with extension request from Form CT-5.4	36	
37	Overpayment credited from prior years (see instructions)	37	
38	Total prepayments (add lines 32 through 37)	38	
39	Balance (subtract line 38 from line 31; if line 38 is larger than line 31, enter 0)	39	25.
40	Estimated tax penalty (see instructions; mark an X in the box if Form CT-222 is attached) <input type="checkbox"/>	40	
41	Interest on late payment (see instructions)	41	
42	Late filing and late payment penalties (see instructions)	42	
43	Balance (add lines 39 through 42)	43	25.

Voluntary gifts/contributions (see instructions):			
44a	Return a Gift to Wildlife	44a	00
44b	Breast Cancer Research & Education Fund	44b	00
44c	Prostate Cancer Research, Detection, and Education Fund	44c	00
44d	9/11 Memorial	44d	00
44e	Volunteer Firefighting & EMS Recruitment Fund	44e	00
44f	Veterans Remembrance	44f	00
45	Add lines 31, 40, 41, 42, and 44a through 44f	45	25.
46	Balance due (If line 38 is less than line 45, subtract line 38 from line 45 and enter here. This is the amount due; enter your payment amount on line A on page 1.)	46	25.
47	Overpayment (If line 38 is more than line 45, subtract line 45 from line 38 and enter here. This is the amount of your overpayment; see instructions.)	47	
48	Amount of overpayment to be credited to next period (see instructions)	48	
49	Refund of overpayment (subtract line 48 from line 47; see instructions)	49	
50	Refund of unused special additional mortgage recording tax credit (current year or deferred; see instructions)	50	
51	Amount of special additional mortgage recording tax credit to be applied as an overpayment to next period	51	

Amended return informationIf filing an amended return, mark an **X** in the box for any items that apply and attach documentation.Final federal determination ☐ If marked, enter date of determination: _____

Third -- party designee (see instructions)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Designee's name (print)	Designee's phone number
	Designee's e-mail address		PIN

Certification: I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

Authorized person	Printed name of authorized person	Signature of authorized person	Official title
	E-mail address of authorized person	Telephone number	Date

Paid preparer use only (see instr.)	Firm's name (or yours if self-employed)	Firm's EIN	Preparer's PTIN or SSN
	ESTHER GULYAS TAX SERVICE INC	16-1474140	000779859
	Signature of individual preparing this return	Address	City
	CHRISTOPHER FABIAN	2475 NIAGARA FALLS	AMHERST NY 14228
	E-mail address of individual preparing this return	Preparer's NYTPRN	Date
			01-21-14

See instructions for where to file.

440003131045



2013

New York S Corporation Shareholders' Information Schedule

Attachment to Form CT-3-S or CT-32-S

Legal name of corporation OFF BEAT PRODUCTIONS INC	Employer identification number (EIN) 16-1546143
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Schedule A – Shareholders' New York State modifications and credits (Enter the total amount reported by the New York S corporation on each line. Each shareholder must include his or her pro rata share of these amounts on his or her personal income tax return.)

Part 1 – Total shareholder modifications related to S corporation items (see instructions)

Additions	1	New York State franchise tax imposed under Article 9-A or Article 32	1
	2	Federal depreciation deduction from Form CT-399, if applicable	2
	3	Other additions (attach explanation)	3
Subtractions	4	Allowable New York depreciation from Form CT-399, if applicable	4
	5	Other subtractions (attach explanation)	5
Other items (attach explanation)	6	Additions to federal itemized deductions	6
	7	Subtractions from federal itemized deductions	7
	8	New York State adjustments to federal tax preference items	8

Part 2 – Total S corporation New York State credits and taxes on early dispositions (see instructions; attach applicable forms)

Investment tax credits (see instructions)

9	Investment tax credit, retail enterprise tax credit, historic barn credit, and employment incentive credit (Form CT-46 and, if applicable, Form CT-46-ATT)	9
10	Investment tax credit on research and development property (Form CT-46)	10
11	Investment tax credit for financial services industry (Form CT-44)	11
12	Tax on early dispositions – investment tax credit, retail enterprise tax credit, historic barn credit, investment tax credit on research and development property, or investment tax credit for financial services industry (Form CT-44 or CT-46)	12

Empire zone (EZ) tax credits (see instructions)

13	EZ wage tax credit (Form CT-601)	13
14	EZ capital tax credit for monetary contributions (Form CT-602)	14
15	EZ investment tax credit (Form CT-603)	15
16	EZ investment tax credit for financial services industry (Form CT-605)	16
17	Recaptured tax credit – EZ capital tax credit, EZ investment tax credit, or EZ investment tax credit for financial services industry (Form CT-602, CT-603, or CT-605)	17

Qualified empire zone enterprise (QEZE) tax credits (see instructions)

18	QEZE real property tax credit allowed (Form CT-606)	18
19	Net recapture of QEZE real property tax credit (Form CT-606)	19
20	QEZE tax reduction credit employment increase factor (Form CT-604)	20
21	QEZE tax reduction credit zone allocation factor (Form CT-604)	21
22	QEZE tax reduction credit benefit period factor (Form CT-604)	22

QEZE tax reduction credit factors from partnership (for multiple partnerships attach separate statements) (see instructions)

23	QEZE partnership EIN	23
24	QEZE employment increase factor (obtain factor from your partnership)	24
25	QEZE zone allocation factor (obtain factor from your partnership)	25
26	QEZE benefit period factor (obtain factor from your partnership)	26

Farmers' school tax credit (see instructions)

27	Total acres of qualified agricultural property	27
28	Total amount of eligible school district property taxes paid	28
29	Total acres of qualified agricultural property converted to nonqualified use	29
30	Total acres of qualified conservation property	30



Part 2 – Total S corporation New York State credits and taxes on early dispositions (continued)**Other credits (attach applicable forms)**

31	Recapture of alternative fuels credit (Form CT-40)	31
32	Credit for employment of persons with disabilities (Form CT-41)	32
33	Rehabilitation of historic properties credit (Form CT-238)	33
34	Recapture of rehabilitation of historic properties credit (Form CT-238)	34
35	Clean heating fuel credit (Form CT-241)	35
36	Biofuel production credit (Form CT-243)	36
37	Empire State commercial production credit (Form CT-246)	37
38	Empire State film production credit for the current year (Form CT-248)	38
39	Empire State film production credit for the second year (Form CT-248)	39
40	Empire State film production credit for the third year (Form CT-248)	40
41	Long-term care insurance credit (Form CT-249)	41
42	Credit for purchase of an automated external defibrillator (Form CT-250)	42
43a	Empire State film post-production credit for the current year (Form CT-261)	43a
43b	Empire State film post-production credit for the second year (Form CT-261)	43b
43c	Empire State film post-production credit for the third year (Form CT-261)	43c
44	Excelsior jobs tax credit component (Form CT-607)	44
45	Excelsior investment tax credit component (Form CT-607)	45
46	Excelsior research and development tax credit component (Form CT-607)	46
47	Excelsior real property tax credit component (Form CT-607)	47
48	Brownfield redevelopment tax credit site preparation credit component (Form CT-611)	48
49	Brownfield redevelopment tax credit tangible property credit component (Form CT-611)	49
50	Brownfield redevelopment tax credit on-site groundwater remediation credit component (Form CT-611)	50
51	Recapture of brownfield redevelopment tax credit (Form CT-611)	51
52	Brownfield redevelopment tax credit site preparation credit component (Form CT-611.1)	52
53	Brownfield redevelopment tax credit tangible property credit component (Form CT-611.1)	53
54	Brownfield redevelopment tax credit on-site ground water remediation credit component (Form CT-611.1)	54
55	Recapture of brownfield redevelopment tax credit (Form CT-611.1)	55
56	Remediated brownfield credit for real property taxes (Form CT-612)	56
57	Recapture of remediated brownfield credit for real property taxes (Form CT-612)	57
58	Environmental remediation insurance credit (Form CT-613)	58
59	Recapture of environmental remediation insurance credit (Form CT-613)	59
60	Security officer training tax credit (attach Form CT-631)	60
61	Economic transformation and facility redevelopment program jobs tax credit component (Form CT-633)	61
62	Economic transformation and facility redevelopment program investment tax credit component (Form CT-633)	62
63	Economic transformation and facility redevelopment program job training tax credit component (Form CT-633)	63
64	Economic transformation and facility redevelopment program real property tax credit component (Form CT-633)	64
65	Taxicabs and livery service vehicles accessible to persons with disabilities credit (Form CT-236)	65
66	QETC employment credit (Form DTF-621)	66
67	QETC capital tax credit (Form DTF-622)	67
68	Recapture of QETC capital tax credit (Form DTF-622)	68
69	Low-income housing credit (Form DTF-624)	69
70	Recapture of low-income housing credit (Form DTF-626)	70
71	Green building credit (Form DTF-630)	71
72	Empire state jobs retention credit (Form CT-634)	72
73	Recapture of empire state jobs retention credit (Form CT-634)	73
74	New York youth works credit (Form CT-635)	74
75	Beer production credit (Form CT-636)	75
76	Alternative fuels and electric vehicle recharging property credit (Form CT-637)	76
77	Recapture of alternative fuels and electric vehicle recharging property credit (Form CT-637)	77
78	Other tax credit(s) and recapture(s) (see instr.)	78



Schedule B – Shareholders' identifying information (see instructions)Photocopy Schedule B, as needed, attach additional sheets, and mark an **X** in the box. ☐

A For each shareholder, enter last name, first name, middle initial on first line; enter home address on second and third lines. (attach federal Schedule K-1 for each shareholder)	B Identifying number (SSN or EIN)	C Percentage of ownership	D Shareholder residency status (make only one entry) 1 for New York State 2 for New York City 3 for Yonkers 4 for NYS nonresident	E Shareholder entity status (make only one entry) I for individual F for estate or trust E for exempt organization
1 DI SCIULLO, JOHN 5260 ROGERS ROAD HAMBURG NY 14075	1 208-52-2963	50.000	1	I
2 GILLAN, JAMES 242 LINCOLN PARKWAY BUFFALO NY 14216	2 121-52-2740	50.000	1	I
3	3			
4	4			
5	5			
6	6			
7	7			
8	8			
9	9			
10	10			
11	11			



e-file

www.tax.ny.gov

**New York State E-File Signature Authorization for Tax Year 2013
For Form CT-3, CT-3-A, CT-3M/4M, CT-3-S, CT-4, CT-13, CT-240,
CT-245, or CT-400**Electronic return originator (ERO)/paid preparer: **do not** mail this form to the Tax Department. Keep it for your records.Legal name of corporation BEAT PRODUCTIONS INC**Return type**

(mark all that apply):

☐ CT-3 ☐ CT-3-A ☐ CT-3M/4M ☒ CT-3-S ☐ CT-4 ☐ CT-13 ☐ CT-240
☐ CT-245 ☐ CT-400

Purpose

Form TR-579-CT must be completed to authorize an ERO to e-file a corporation tax return and to transmit bank account information for the electronic funds withdrawal.

General instructions

Part A must be completed by an officer of the corporation who is authorized to sign the corporation's return before the ERO transmits the electronically filed Form CT-3, *General Business Corporation Franchise Tax Return*; CT-3-A, *General Business Corporation Combined Franchise Tax Return*; CT-3M/4M, *General Business Corporation MTA Surcharge Return*; CT-3-S, *New York S Corporation Franchise Tax Return*; CT-4, *General Business Corporation Franchise Tax Return Short Form*; CT-13, *Unrelated Business Income Tax Return*; CT-240, *Foreign Corporation License Fee Return*; CT-245, *Maintenance Fee and Activities Return For a Foreign Corporation Disclaiming Tax Liability*; or CT-400, *Estimated Tax for Corporations*.

EROs/paid preparers must complete Part B prior to transmitting electronically filed corporation tax returns. Both the paid preparer and the

ERO are required to sign Part B. However, if an individual performs as both the paid preparer and the ERO, he or she is only required to sign as the paid preparer. It is not necessary to include the ERO signature in this case. Note that an alternative signature can be used as described in TSB-M-05(1)C, *Alternative Methods of Signing for Tax Return Preparers*. Go to our Web site at www.tax.ny.gov to find this document.

Do not mail this form to the Tax Department. EROs/paid preparers must keep this form for three years and present it to the Tax Department upon request.

Do not use this form for electronically filed Form CT-5, *Request for Six-Month Extension to File (for franchise/business taxes, MTA surcharge, or both)*, Form CT-5.3, *Request for Six-Month Extension to File (for combined franchise tax return, or combined MTA surcharge, or both)*, Form CT-5.4, *Request for Six-Month Extension to File New York S Corporation Franchise Tax Return*, Form CT-5.9, *Request for Three-Month Extension to File (for Article 9 tax return, MTA surcharge, or both)*, or Form CT-5.9-E, *Request for Three-Month Extension to File Form CT-186-E*. Instead use Form TR-579.1-CT, *New York State Authorization for Electronic Funds Withdrawal For Tax Year 2013*.

Financial institution information (required if electronic payment is authorized)

1 Amount of authorized debit 1. _____
 2 Financial institution routing number 2. _____
 3 Financial institution account number 3. _____

Part A - Declaration of authorized corporate officer for Form CT-3, CT-3-A, CT-3M/4M, CT-3-S, CT-4, CT-13, CT-240, CT-245 or CT-400

Under penalty of perjury, I declare that I have examined the information on this 2013 New York State electronic corporate tax return, including any accompanying schedules, attachments, and statements, and certify that this electronic return is true, correct, and complete. If this filing includes Form DTF-686, *Tax Shelter Reportable Transactions*, as an authorized officer of the corporation, I hereby consent to the waiver of the secrecy provisions of Tax Law sections 202, 211.8, 1467, and 1518 as such provisions relate to the disclosure requirements of Tax Law section 25. The ERO has my consent to send this 2013 New York State electronic corporate return to New York State through the Internal Revenue Service (IRS). I understand that by executing this Form TR-579-CT, I am authorizing the ERO to sign and file this return on behalf of the corporation and agree that the ERO's submission of the corporation's return to the IRS, together with this authorization, will serve as the electronic signature for the return and any authorized payment transaction. If I am paying New York State corporation taxes due by electronic funds withdrawal, I authorize the New York State Tax Department and its designated financial agents to initiate an electronic funds withdrawal from the financial institution account indicated on this 2013 electronic return, and I authorize the financial institution to withdraw the amount from the account. I understand and agree that I may revoke this authorization for payment only by contacting the Tax Department no later than five business days prior to the payment date.

Signature of authorized officer of the corporation: _____

Date: 01/24/2014

Print your name and title: _____

PRESIDENT

Part B - Declaration of ERO and paid preparer

Under penalty of perjury, I declare that the information contained in this 2013 New York State electronic corporate tax return is the information furnished to me by the corporation. If the corporation furnished me a completed paper 2013 New York State corporate tax return signed by a paid preparer, I declare that the information contained in the corporation's 2013 New York State electronic corporate tax return is identical to that contained in the paper return. If I am the paid preparer, under penalty of perjury I declare that I have examined this 2013 New York State electronic corporate tax return, and, to the best of my knowledge and belief, the return is true, correct, and complete. I have based this declaration on all information available to me.

ERO's signature: _____

Date: 01/24/2014Print name: ESTHER GULYAS TAX SERVICEPaid preparer's signature: CHRISTOPHER FABIANDate: 01/24/2014Print name: ESTHER GULYAS TAX SERVICE

ERO/Preparer Certification and Signature

2013

I certify that I have prepared Form TR-579-CT, New York State E-File Signature Authorization for Tax Year 2013, signed by the authorized officer of the corporation, authorizing me to sign and file this return on behalf of the corporation. I further certify that all information provided on the return is true, correct and complete to the best of my knowledge and belief, and that I have provided a copy of this return to the corporation. If financial institution account information has been provided on the return, I certify that the corporation has agreed to payment of the amount indicated as due by electronic funds withdrawal, that the corporation has authorized the New York State Tax Department and its designated financial agents to initiate an electronic funds withdrawal from the indicated account, and that the designated financial institution is authorized to debit the entry to the corporation's account. By checking the box shown below, I understand and agree that I am electronically signing and filing this return.

☒ I have read the certification above and agree.

CURRENT ASSETS AND LIABILITIES

Off Beat Productions operates with a basic business checking account.

We bill our advertisers, collect those monies, and pay for the production of the program as noted in the financial statements.

An example of this basic account from the last month prior to this filing is included as an example.

Off Beat Productions does not have a savings account, investment account, money market account, certificate of deposit, bonds, stocks, trust/endowment accounts.

Off Beat Productions did not have any obligations or debts on the last day of the calendar year, other than to pay for production expenses as they are incurred.

Off Beat Productions does not have any loans, mortgage payments, taxes, insurance, credit card balances, or unpaid bills (utility or medical).

Off Beat Productions does not have any accrued liabilities; notes payable; long term-debt; and taxes payable.

The basic business checking account balance as of 12/31/2012 was: **\$29.18**

The basic business checking account balance as of 12/31/2013 was: **\$728.81**

The basic business checking account balance as of this writing is: **\$141.00**

ADDITIONAL INFORMATION:

In order to provide some alternatives as described in the Request for Supplemental Information, Off Beat Productions will work to create graphic "bumps" and text information during various breaks and show segments that offer information about the motion picture; the stars; the premise of the movie; and other information on how to interact with the program producers through our social media and website.



**FIRST
NIAGARA**

ACCOUNT STATEMENT

Statement Date:

April 30, 2014

Primary Account Number:

xxxxxxxx1695

Return Mail Services

PO Box 1237 South Windsor, CT 06074

AV 01 074491 11739B223 A**5DGT



OFF BEAT PRODUCTIONS, INC
5260 ROGERS RD APT B1
HAMBURG NY 14075-3584



Customer Service

1-800-421-0004



Automated Telephone Banking

1-800-439-8230



Customer.Service@fnfg.com



Customer Service - Bank by Mail

P.O. Box 527
Lockport, NY 14095-0527

See your account activity, pay bills and more...visit First Niagara Online Banking at FirstNiagara.com.

Our thing.

Helping you consolidate debt and relieve stress

ULTRAFLEX HOME EQUITY LINE OF CREDIT SALE!

Call 1-866-892-2960
or Visit firstniagara.com/HELOC



MEMBER FDIC
First Niagara Bank, N.A. NMLBH #13089



**FIRST
NIAGARA**

BANK / BORROW / INVEST / PROTECT

HOME EQUITY LINE OF CREDIT

SUMMARY OF ACCOUNTS

Account	Account Type	Current Balance (\$)	Interest Rate (%)	APY (%)	Interest YTD (\$)
xxxxxxxx1695	Free Business Checking	429.56			

Free Business Checking - xxxxxxxx1695

Statement from 04/01/14 Through 04/30/14

Account Summary

Beginning Balance (\$)	+	Deposits (\$)	+	Interest Paid (\$)	-	Withdrawals (\$)	-	Service Charge (\$)	=	Ending Balance (\$)
473.56		766.00		.00		810.00		.00		429.56

Transactions by Date

Posting Date	Transaction Description	Debit (-\$)	Credit (+\$)	Balance (\$)
04/03	Check Num 1641	25.00		448.56
04/05	Deposit		200.00	648.56
04/08	Check Num 1643	75.00		573.56
04/08	Check Num 1638	35.00		538.56
04/12	Deposit		66.00	604.56
04/18	Deposit		500.00	1,104.56
04/24	Check Num 1645	300.00		804.56
04/25	Check Num 1646	375.00		429.56



**FIRST
NIAGARA**

Return Mail Services
PO Box 1237 South Windsor, CT 06074

Free Business Checking - xxxxxxxx1695

OFF BEAT PRODUCTIONS
ONE ROGERS RD UNIT B1
HAMBURG, NY 14078

1638

Pay to the Order of First Niagara \$ 35.00

For First Niagara

1638 04/08/14 \$35.00

OFF BEAT PRODUCTIONS
ONE ROGERS RD UNIT B1
HAMBURG, NY 14078

1641

Pay to the Order of First Niagara \$ 25.00

For First Niagara

1641 04/03/14 \$25.00

OFF BEAT PRODUCTIONS
ONE ROGERS RD UNIT B1
HAMBURG, NY 14078

1643

Pay to the Order of First Niagara \$ 75.00

For First Niagara

1643 04/08/14 \$75.00

OFF BEAT PRODUCTIONS
ONE ROGERS RD UNIT B1
HAMBURG, NY 14078

1645

Pay to the Order of First Niagara \$ 300.00

For First Niagara

1645 04/24/14 \$300.00

OFF BEAT PRODUCTIONS
ONE ROGERS RD UNIT B1
HAMBURG, NY 14078

1646

Pay to the Order of First Niagara \$ 375.00

For First Niagara

1646 04/25/14 \$375.00

DECLARATION

I declare under penalty of perjury that the information contained in this submission is true and correct.

A handwritten signature in black ink, appearing to read "John DiSciullo", is written over the printed name.

John DiSciullo

Off Beat Productions

5/12/14